

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
Medical Device Manufacturers Association PAC

ADDRESS (number and street) P.O. Box 34591
Check if different than previously reported. (ACC) Washington DC 20043

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00484162
3. IS THIS REPORT NEW OR AMENDED (N) (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), Apr 20 (M4), Jul 20 (M7), Oct 20 (M10), Jan 31 (YE)
(c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)
(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 07 / 01 / 2021 through 12 / 31 / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Devinney, Sheri, , ,
Type or Print Name of Treasurer

Signature of Treasurer Devinney, Sheri, , , [Electronically Filed] Date 01 / 31 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

**Medical Device Manufacturers Association PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>		47271.55
(b) Cash on Hand at Beginning of Reporting Period.....	133271.55	
(c) Total Receipts (from Line 19) .....	5000.00	114000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	138271.55	161271.55
7. Total Disbursements (from Line 31).....	7500.00	30500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	130771.55	130771.55
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Medical Device Manufacturers Association PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2021 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2021

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	96000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	96000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	17500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5000.00	113500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	5000.00	114000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5000.00	114000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7500.00	30500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7500.00	30500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7500.00	30500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5000.00	113500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5000.00	113500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 10
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Medical Device Manufacturers Association PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Abbott Laboratories Employee Political Action Committee**

Mailing Address 100 Abbott Park Rd.

City Abbott Park	State IL	Zip Code 60064-6028
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040279

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		20		2021

**Transaction ID : A2021-18967**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Contribution from Federal PAC

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Medical Device Manufacturers Association PAC**

**A. Cathy McMorris Rodgers for Congress**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address Box 137

M M M	/	D D D	/	Y Y Y Y Y
07		28		2021

City Spokane State WA Zip Code 99210

FEC Identification Number

Purpose of Disbursement Contribution

011
Category/Type

C	C00390476
---	-----------

Transaction ID : B806706

Amount of Each Disbursement this Period

Candidate Name  
**McMorris Rodgers, Cathy, , ,**

2000.00
---------

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: WA District: 05

Memo Item

**B. Alex Padilla for Senate**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 777 S. Figueroa St. #4050

M M M	/	D D D	/	Y Y Y Y Y
10		27		2021

City Los Angeles State CA Zip Code 90017

FEC Identification Number

Purpose of Disbursement Contribution

011
Category/Type

C	C00765164
---	-----------

Transaction ID : B806707

Amount of Each Disbursement this Period

Candidate Name  
**Padilla, Alex, , ,**

1000.00
---------

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: CA District:

Memo Item

**C. Tim Scott For US Senate**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1405 Ashley River Road

M M M	/	D D D	/	Y Y Y Y Y
11		17		2021

City Charleston State SC Zip Code 29407

FEC Identification Number

Purpose of Disbursement Contribution

011
Category/Type

C	C00540302
---	-----------

Transaction ID : B806708

Amount of Each Disbursement this Period

Candidate Name  
**Scott, Tim, , ,**

3500.00
---------

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: SC District:

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Medical Device Manufacturers Association PAC**

Full Name (Last, First, Middle Initial)

**A. Angie Craig for Congress**

Mailing Address PO Box 22116

City  
Eagan

State  
MN

Zip Code  
55122

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Craig, Angie, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: MN District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			10			2021			

FEC Identification Number

**C** C00575209

**Transaction ID : B806916**

Amount of Each Disbursement this Period

- 1000.00

Memo Item 11/15/19  
Voided: Original check dated

Full Name (Last, First, Middle Initial)

**B. Ben Sasse for US Senate Inc.**

Mailing Address 700 R St Unit 83978

City  
Lincoln

State  
NE

Zip Code  
68501

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Sasse, Ben, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify)

State: NE District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			10			2021			

FEC Identification Number

**C** C00547976

**Transaction ID : B806906**

Amount of Each Disbursement this Period

- 2000.00

Memo Item  
Voided: Original check dated 05/13/20

Full Name (Last, First, Middle Initial)

**C. Schneider for Congress**

Mailing Address P.O. Box 1318

City  
Deerfield

State  
IL

Zip Code  
60015

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Schneider, Brad, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			10			2021			

FEC Identification Number

**C** C00495952

**Transaction ID : B806933**

Amount of Each Disbursement this Period

- 2500.00

Memo Item  
Voided: Original check dated 09/24/19

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

- 5500.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Medical Device Manufacturers Association PAC**

**A. Citizens for Boyle**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 14310

City Philadelphia State PA Zip Code 19115

Purpose of Disbursement Contribution  
Candidate Name Boyle, Brendan, F, ,  
Office Sought:  House  Senate  President  
Disbursement For: 2022  
 Primary  General  Other (specify) ▼  
State: PA District: 02

Date of Disbursement: 12 / 29 / 2021

FEC Identification Number: C00543363  
Transaction ID : B808702  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. Marsha for Senate**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 3750

City Nashville State TN Zip Code 37024

Purpose of Disbursement Contribution  
Candidate Name Blackburn, Marsha, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2024  
 Primary  General  Other (specify) ▼  
State: TN District:

Date of Disbursement: 12 / 29 / 2021

FEC Identification Number: C00376939  
Transaction ID : B808703  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. Michael Burgess for Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 2334

City Denton State TX Zip Code 76202

Purpose of Disbursement Contribution  
Candidate Name Burgess, Michael C., , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2022  
 Primary  General  Other (specify) ▼  
State: TX District: 26

Date of Disbursement: 12 / 29 / 2021

FEC Identification Number: C00372532  
Transaction ID : B808704  
Amount of Each Disbursement this Period: 1000.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Medical Device Manufacturers Association PAC**

**A. Nevadans for Steven Horsford**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 336664

City North Las Vegas State NV Zip Code 89033

Purpose of Disbursement Contribution  
Candidate Name Horsford, Steven, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: NV District: 04

Date of Disbursement: 12 / 29 / 2021

FEC Identification Number: C00668228  
Transaction ID : B808706  
Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

Memo Item

**B. Texans for Jodey Arrington**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 6687

City Lubbock State TX Zip Code 79493

Purpose of Disbursement Contribution  
Candidate Name Arrington, Jodey, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: TX District: 19

Date of Disbursement: 12 / 29 / 2021

FEC Identification Number: C00588657  
Transaction ID : B808705  
Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement: / /

FEC Identification Number: C  
Amount of Each Disbursement this Period:

Category/Type:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7500.00